

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER: AL11965330	(X3) DATE SURVEY COMPLETED 04/29/2014
NAME OF PROVIDER OR SUPPLIER Arcadia Oaks Assisted Living	STREET ADDRESS, CITY, STATE, ZIP CODE 1013 East Gibson Street Arcadia, FL 34266	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAG AND REGULATORY IDENTIFYING INFORMATION)		

These are the results of an unannounced Complaint Survey, CCR# 2014001541 which was conducted on 4/29/14 at Arcadia Oaks, an Assisted Living Facility (ALF) on 4/29/14.

The allegations were not substantiated and the facility received not citations as a result of this survey.

A monitoring visit was also conducted at Arcadia Oaks simultaneous with the complaint survey. Resident weights were reviewed, hot water was reviewed and infection control was reviewed.

All areas concern had no issues.



RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

June 7, 2014

Administrator
Arcadia Oaks Assisted Living
1013 East Gibson Street
Arcadia, FL 34266

Re: CCR #2014001541

Dear Administrator:

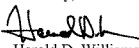
This letter reports the findings of a complaint and monitoring survey completed on April 29, 2014 by a representative of this office.

Attached is the provider's copy of the Statement of Deficiencies, State (5000-3547) Form, indicating no deficiencies were identified during this survey. **You will not receive a copy of this report in the mail; you will only receive this faxed copy.**

The *Quality Assurance Questionnaire* has long been employed to obtain your feedback following survey activity. This form has been placed on the Agency's website at <http://ahca.myflorida.com/Publications/Forms.shtml> as a first step in providing a web-based interactive consumer satisfaction survey system. You may access the questionnaire through the link under **Health Facilities and Providers** on this page. Your feedback is encouraged and valued, as our goal is to ensure the professional and consistent application of the survey process.

Thank you for the assistance provided to the surveyor. Should you have any questions, please contact this office at (239) 335-1315.

Sincerely,


Harold D. Williams
Field Office Manager

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Enclosure: State Form

